## PART B - FEE(S) TRANSMITTAL

| OCT 0 % 2006  | this form, together w                                     |  | or <u>Fa</u>   | P.O. Box 1450<br>Alexandria, Virg<br>(571)-273-2885  | or Patents<br>ginia 22313-1450   |   |
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| NSTRUCTIONS This for  | rm should be used for trar<br>respondence including the   | esmitting the ISSU<br>Patent, advance or   | JE FEE and PUB   | LICATION FEE (if requon of maintenance fees  | will be mailed to the curren   | should be completed where<br>t correspondence address as  |
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| 32692 75  | 90 . 06/30/2006   |  | · .  | have its own certificat  | te of mailing or transmission.   |   |
| 3M INNOVATIV<br>PO BOX 33427<br>ST. PAUL, MN 55   | /E PROPERTIES CO<br>133-3427                              | OMPANY   |  | I hereby certify that the States Postal Service addressed to the Matransmitted to the US   | rtificate of Mailing or Tran<br>from the sec(s) Transmittal is bein<br>with sufficient postage for fi<br>il Stop ISSUE FEE address<br>PTO (571) 273-2885, on the | smission g deposited with the United rst class mail in an envelope above, or being facsimile date indicated below.                        |
| 10/04/2006 CCHAU2 00000005 133723 10798649  |   |  |  | Judy L. Hansen (Depositor's name)  |  |   |
| 01 FC:1501 1400.<br>02 FC:8001 9.0  |   | Geoly  | 2 Hansen   | (Signature)  |  |   |
| 03 FC:1504 300.00 DA  |   |  |  | September  | 1  | (Date)  |
| APPLICATION NO.   |   |  |  | ENTOR  | ATTORNEY DOCKET NO.  | CONFIRMATION NO.  |
| 10/798,649 03/11/2004 Robert Lec 59605US002 6327 TITLE OF INVENTION: UNIT DOSE DELIVERY SYSTEM  |   |  |  |  |  |   |
| APPLN. TYPE   | SMALL ENTITY  | ISSUE F  | EE   | PUBLICATION FEE  | TOTAL FEE(S) DUE   | DATE DUE  |
| nonprovisional  | NO  | \$1400   | )  | \$300  | \$1700   | 10/02/2006  |
| EXAMINER  |   | ART UNIT   |  | CLASS-SUBCLASS   | <b>.</b>   |   |
| WALCZAK, DAVID J  1. Change of correspondence address or indication of "Fe  |   | 3751   |  | 401-128000   |  |   |
| 1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.                                  | Correspondence  | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  |  |  |  |   |
| (A) NAME OF ASSIGN  | an assignee is identified be 37 CFR 3.11. Completion      | elow, no assignee of this form is NO   | data will appear of a substitute for fi (B) RESIDENCE  | 7.5  | ·  | document has been filed for   |
| Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔀 Corporation or other private group entity 🚨 Government                   |   |  |  |  |  |   |
| 4a. The following fee(s) are  Issue Fee  Publication Fee (No s  Advance Order - # of  | ed)   | b. Payment of Fcc(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fcc(s), or credit any overpayment, to Deposit Account Number 13-3723 (enclose an extra copy of this form).   |  |  |  |   |
| 5. Change in Entity Status  a. Applicant claims Si  | (from status indicated above MALL ENTITY status. See      | •  | ☐ b. Applicant is  | no longer claiming SMA   | LL ENTITY status. See 37 C   | CFR 1.27(g)(2).   |
|   | is requested to apply the Issublication Fee (if required) | ue Fee and Publicat  | tion Fee (if any) or<br>d from anyone othe<br>Office.  | to re-apply any previous<br>r than the applicant; a reg  | ly paid issue fee to the applic<br>istered attorney or agent; or t   | ation identified above.<br>he assignee or other party in  |
| Authorized Signature  |   |  |  | Date   | September 29, 20   | 06  |
| Typed or printed name Peter L. Olson  |   |  |  | Registration   |  |   |
| This collection of informatic<br>an application. Confidential<br>submitting the completed ap<br>this form and/or suggestions<br>Box 1450, Alexandria, Virg<br>Alexandria, Virginia 22313- | s for reducing this burden, slinia 22313-1450. DO NOT     | 11. The informatio<br>122 and 37 CFR<br>O. Time will vary<br>nould be sent to the<br>SEND FEES OR C  | on is required to obtained to a control of the cont | tain or retain a benefit by on is estimated to take 12 the individual case. Any c of Officer, U.S. Patent and RMS TO THIS ADDRES | the public which is to file (an<br>minutes to complete, includi<br>omments on the amount of ti<br>1 Trademark Office, U.S. Dep<br>S. SEND TO: Commissioner       | d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, |

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